ISSUE SLIP STAFLE AREAS - Minimal cross references) **POSITION** INITIALS ID 110. DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** INDEX OF CLAIMS Interference (Through numeral) CanceledResproted Objected Claim Date Claim Date 0 87

If mor than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)